HCE	E Filed 8.6.04
PATENT APPLICATION FEE	E DETERMINATION RECORD

Application or Docket Number

10/1027869

Effective October 1, 2003												
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL EN		OR	OTHER SMALL I	
TOTAL CLAIMS						-	RATE	FEE		RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	385.00	OR	BASIC FEE	770.00
TOTAL CHANGE CLAIMS			minus 20=		•		-	X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS			minus 3 = *		<u> </u>			X43=		OR	X86≖	
MULTIPLE DEPENDENT CLAIM PRESENT								+145=		OR	+290≖	
* If the difference in column 1 is less than zero, enter "0" in column 2								TOTAL		OR	TOTAL	
9.14.04 CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)								SMALL	ENTITY	OR	OTHER SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	#ST	EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
OME	Total	· 11	Minus	*2	0	=	-	X\$ 9=		ØR	X\$18=	
MEN	Independent	• 2	Minus	*** (3	-	4	X43=		OR	X86=	<u>, </u>
٩	FIRST PRESE	NTATION OF MU	JLTIPLE DEF	PENDEN	TCLAIM		ِ ل	+145=		OR	+290=	7
								TOTAL ADDIT, FEE		OR	TOTAL ADDIT, FEE	
		(Column 1)		(Coh:	mn 2)	(Column 3		ADDII. 1 CC				
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGI NUA PREVI	HEST MBER HOUSLY FOR	PRESENT EXTRA-		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	**		-		X\$ 9=		OR	X\$18=	·
	Independent	•	Minus	***		-	1	X43=		ОЯ	X86=	
Ľ	FIRST PRESE	NTATION OF M	JLTIPLE DEI	PENDEN	T CLAIM		٦	+145=		OR	+290=	
·.								TOTAL ADDIT. FEE		ОЯ	ADOIT. FEE	
		(Column 1)			mn 2)	(Column 3	3)_			_		
AMENDMENT C	•	CLAIMS REMAINING AFTER AMENDMENT		NUI PREV	HEST MBER 10USLY D FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADOI- TIONAL FEE
	Total	•	Minus	**		=		X\$ 9=		OF	X\$18=	
	Independ nt	•	Minus	200		-	1	X43=		OF	X86=	
L	FIRST PRESE	ENTATION OF M	ULTIPLE DE	PENDEN	IT CLAIN		_	.145		1	1300-	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. * If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."												
The "Highest Number Previously Paid For" (Total or Independent) is the highest number tound in the appropriate box in column 1.												
Patient and Trademath Office, U.S. DEPARTMENT OF COMMERC												